

Best Available Copy

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM FTO-570)							SERIAL NO.	FILING DATE				
							APPLICANT'S					
CLAIMS												
	AS FILED		AFTER 1st ABANDONMENT		AFTER 2nd ABANDONMENT							
	W/O.	DEF.	W/O.	DEF.	W/O.	DEF.						
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50												
TOTAL W/O.	5											
TOTAL DEF.	41											
TOTAL	46											

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